SEC 1972 (6/99)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

OCT 2 1 2002

NOTICE OF SALE OF SECURPTIES PURSUANT TO REGULATION O. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY				
Prefix		Serial		
DAT	E DECEI	VED		
DATE RECEIVED				

OMB APPROVAL

OMB Number: 3235-0076

Estimated average burden hours per response...1

Expires: November 30, 2001

Name of Offering (check if this is an amendment and name has changed, and indicate change.) September Funding Group, LLC Private Placement of Membership Interests

Filing Under (Check [] Rule 504 [] Rule 505 [x] Rule 506 [x] Section 4(6) [] ULOE box(es) that apply): Type of Filing: [x] New Filing [] Amendment

PROCESSED

OCT 2 5 2002

THOMSON

A. BASIC IDENTIFICATION DATA
Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) September Funding Group, LLC
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 8730 Sunset Boulevard, Suite 700, Los Angeles, California 90069 (310) 734-5600
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)
Brief Description of Business: Investment holding company
Type of Business Organization [] corporation [] limited partnership, already formed [x] other (please specify): [] business trust [] limited partnership, to be formed Limited liability company
Month Year
Actual or Estimated Date of Incorporation or Organization: [0]9] [0]2] [x] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) [C][A]

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

		***************************************		•••••		
Check Box(es) [x] that Apply:	Promoter	[x]	Beneficial Owner	[]	Executive [] Director [x] Officer	General and/or Managing Partner
Full Name (Last nam AmericanFone, Ll				ility	company	
Business or Resider 8730 Sunset Boul					, City, State, Zip Code) California 90069	
Check Box(es) [] that Apply:	Promoter	[x]	Beneficial Owner	[x]	Executive [] Director [] Officer	General and/or Managing Partner
Full Name (Last nan Gordon, Richard j		dividu	ual)			
Business or Resider 8730 Sunset Boul					, City, State, Zip Code) California 90069	
Check Box(es) [] that Apply:	Promoter	[]	Beneficial Owner	[x]	Executive [] Director [] Officer	General and/or Managing Partner
Full Name (Last nan Hickox, Gary	ne first, if inc	divid	ual)			
Business or Resider 8730 Sunset Boul		•			, City, State, Zip Code) California 90069	

Check Box(es) [] Promote that Apply:	er []	Beneficial Owner	[x]	Executive [] Director [] Officer	General and/or Managing Partner	
Full Name (Last name first, if Dillard, Warren	individ	ual)				
Business or Residence Addre 8730 Sunset Boulevard, St						
Check Box(es) [] Promote that Apply:	er [x]	Beneficial Owner	[]	Executive [] Director [] Officer	General and/or Managing Partner	
Full Name (Last name first, if individual) Four Star Financial Services, LLC, a California limited liability company						
Business or Residence Addre 11755 Wilshire Blvd., Ste.				• • • • • •		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

			E	. INFO	RMATIO	N ABOU	T OFFE	RING				=
	the issuering?							ccredited		s in Yes	No [x]	=
						\$ <u>10</u>	<u>,000*</u>					
3. Doe:	, ,				[x]	No []						
given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) None						=						
			(2) 	***************************************		Street, C	City, State	e, Zip Co	de):			•
Name	of Asso	ciated E	Broker or	Dealer								
States	in Whic	ch Perso	n Listed	Has So	licited or	r Intends	to Solici	t Purcha	sers			
(Chec	k "All	States"	or chec	k indiv	dual St	ates)				[] All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE]	[NV] [SD]	[NH] [TN]	[NJ] [XT]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering
and the total amount already sold. Enter "0" if answer is "none" or "zero."
If the transaction is an exchange offering, check this box " and indicate
in the columns below the amounts of the securities offered for exchange
and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$	\$
Equity	\$	\$
[] Common [] Preferred	·	· —
Convertible Securities (including warrants)	\$	\$
Partnership Interests (Pref. Units of Membership Interest)	\$100,000	\$0
Other (Specify:)	\$	\$
Total	\$100,000	\$0
Answer also in Appendix, Column 3, if filing under ULOE.		

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u>, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Dol	regate lar Amount Purchases
Accredited Investors	0	\$	0
Non-accredited Investors	0	\$	0
Total (for filings under Rule 504 only)	n/a	\$	n/a
Answer also in Appendix, Column 4, if filing under ULOE.			

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dollar Amount Sold
Rule 505	<u>n/a_</u>	\$ n/a
Regulation A	n/a	\$n/a
Rule 504	n/a	\$n/a
Total	<u>n/a</u>	\$n/a

4. a. Furnish a statement of all expenses in connection with the issua		of
the securities in this offering. Exclude amounts relating solely to orga	inization expenses of	
the issuer. The information may be given as subject to future conting	encies. If the amount	
of an expenditure is not known, furnish an estimate and check the bo	ox to the left of the	
estimate.		, 1 o
Transfer Agent's Fees		[]\$
Printing and Engraving Costs		[x] \$100
Legal Fees		[] \$
Accounting Fees		[] \$
Engineering Fees		[] \$
Sales Commissions (specify finders' fees separately)		[] \$
Other Expenses (identify)("Blue Sky" Filing Fees)		[x] \$ <u>150</u>
Total	•••••	[x] \$ <u>250</u>
b. Enter the difference between the aggregate offering price given in Question 1 and total expenses furnished in response to Part C - Quedifference is the "adjusted gross proceeds to the issuer."	estion 4.a. This ssuer the equal	\$ 99,750 Payments To Others
	Directors, & Affiliates	Others
Salaries and fees	[]\$	[]\$
Purchase of real estate	[]\$	[]\$
Purchase, rental or leasing and installation of machinery	[]\$	[]\$
and equipment	L J *	
Construction or leasing of plant buildings and facilities	[]\$	[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$	[]\$
Repayment of indebtedness	[]\$	[]\$
Working capital	[]\$	[]\$
Other (specify):	[]\$	[]\$
Investment in contract rights	[x] \$ 99,750	[]\$
mroom or more name	[]\$	[]\$
Column Totals	[x] \$ 99,750	[]\$
T 1 I D do liteta d'Academ t. 1	- 	
Total Payments Listed (column totals added)	[x] \$	99,750

http://www.sec.gov/smbus/forms/d.htm Last update: 07/09/1999

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u>, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

September Funding Group, LLC

Name of Signer (Print or Type)

Warren Dillard

Signature

Sept. 25, 2002

Title of Signer (Print or Type)

Secretary and Treasurer of AmericanFone, LLC,

Manager of the Issuer

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)